

00-~~R~~-1361

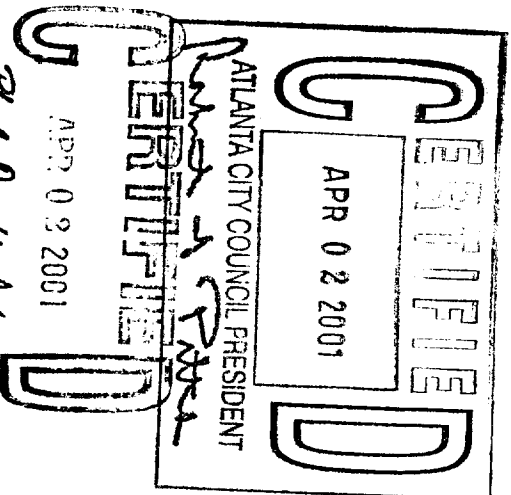
Entered - 04/26/00 - sb
CL99L0237 - DIANNE C. MITCHELL

CLAIM OF: JOHN R. TAYLOR
P. O. Box 11447
Atlanta, Georgia 30310

For damages alleged to have been sustained
as a result of the wrongful demolition of
property on December 7, 1999 at 1479
Memorial Drive, SE.

THIS ADVERSED REPORT IS
APPROVED

BY: Rosalind Rubens Newell
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY



Rosalind Rubens Newell
MUNICIPAL CLERK

APR 02 2001

ADVERSE REPORT
ACK: ADVERSE REPORT

PS 4 LA

9/12/00

HEAD

9/20/00 2/13/01

10/31/00

11/14/00

11/28/00

12/12/00

12/14/01

1/30/01

3/27/01

(ADVERSED)

[Signature]

[Signature]

CH [Signature]

[Signature]



OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC
MUNICIPAL CLERK

55 TRINITY AVENUE, S.W.
SECOND FLOOR, EAST
SUITE 2700
ATLANTA, GEORGIA 30335
(404) 330-6033
FAX (404) 658-6103

April 18, 2001

John R. Taylor
P.O. Box 11447
Atlanta, GA 30310

00-R-1361

Dear Mr. Taylor:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on April 02, 2001. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the **City Attorney's Office/Claims Division** at (404) 330-6400.

Sincerely,

Rhonda Dauphin Johnson, CMC
Municipal Clerk

cc: **Claims Division/Law Department**

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 00L0237

Date: August 22, 2000

Claimant /Victim JOHN R. TAYLOR

BY: (Atty) _____

Address: P. O. Box 11447, Atlanta, Georgia 30310

Subrogation: _____ Claim for Property damage \$ Not Stated Bodily Injury \$ _____

Date of Notice: 04/20/00 Method: Written, proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 12/07/99 Place: 1479 Memorial Drive, SE

Department Housing Division Housing Code

Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: The claimant alleges his property was wrongfully demolished. The investigation determined that the City Housing Code Division complied with all requirements set forth in State law and in the City ordinance prior to having the property demolished. The City is immune from liability as set forth in O.C.G.A. §36-33-1.

INVESTIGATION:

Statements: City employee _____ Claimant _____ Others _____ Written _____ Oral _____

Pictures _____ Diagrams _____ Reports: Police _____ Dept Report X Other _____

Traffic citations issued: City Driver _____ Claimant Driver _____

Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial _____

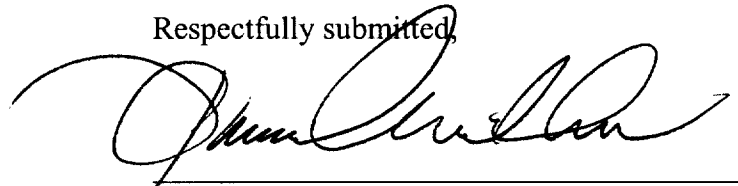
Improper Notice _____ More than Six Months _____ Other X Damages reasonable _____

City not involved _____ Offer rejected _____ Compromise settlement _____

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned _____

Respectfully submitted,



INVESTIGATOR - DIANNE C. MITCHELL

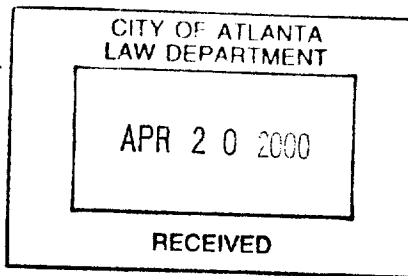
RECOMMENDATION:

Pay \$ _____ Adverse X Account charged: 1A01 _____ 2J01 _____ 2H01 _____

Claims Manager: [Signature] Concur/date 08-22-00

Committee Action: _____ Council Action _____

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK
City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335



RE: CLAIM FOR DAMAGES

Today's Date: April 20, 2000

ENTERED - 04/26/00 - tew
00L0237 - DIANNE C. MITCHELL

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ Wrongful Demolishing of property and/or \$ _____ bodily injury for which I contend the City is liable.

1. Date of incident: December 7 1999 (month/day/ year) 2. Time of Incident: _____ 3. Police called: _____ Yes ☒ No ☐
4. Location of incident (including street address): 1479 Memorial Drive S.E. Atlanta
5. Name of your insurance company: My claim is to have the Policy No. _____
6. State what and how incident occurred: My claim is to have the demolition process from the City of Atlanta to start over on my property listed at 1479 Memorial Dr. from a proper notice to a property hearing, please make any notice of a hearing 45 days or more before hearing. My property was wrongfully demolished.
7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!
8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: _____
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: _____
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____
(Name) (Address) (Telephone Number)

10. The acknowledgment of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Signature of Claimant

John B. Taylor
(Print Claimant's Name)

P.O. Box 11447
(Address)

Atlanta, Ga. 30310
(City, State and Zip Code)

404-629-9219 770-994-1444
(Work Number) (Home Number)
Contact Contact

00- -1361

RCS# 2775
4/02/01
2:17 PM

Atlanta City Council

Regular Session

CONSENT

Pages 1 thru 13

SEE ATTACHED LISTING OF
ITEMS ADOPTED/ADVERSED
ON CONSENT AGENDA

ADOPT

YEAS: 13
NAYS: 0
ABSTENTIONS: 0
NOT VOTING: 1
EXCUSED: 0
ABSENT 2

Unanimous

Y McCarty	Y Dorsey	Y Moore	Y Thomas
Y Starnes	Y Woolard	B Martin	Y Emmons
Y Bond	Y Morris	Y Maddox	B Alexander
Y Winslow	Y Muller	Y Boazman	NV Pitts

ITEM (S) REMOVED FROM
CONSENT AGENDA
01-O-0345
01-O-0526
01-R-0541

CONSENT

04/02/01 Council Meeting

**ITEMS ADOPTED ON
CONSENT AGENDA**

1. 01-O-0225
2. 01-O-0534
3. 01-O-0528
4. 01-O-0539
5. 01-O-0530
6. 01-O-0531
7. 01-R-0527
8. 99-R-2071
9. 01-R-0368
10. 01-R-0481
11. 01-R-0536
12. 01-R-0537
13. 01-R-0550
14. 01-R-0484
15. 01-R-0485
16. 01-R-0486
17. 01-R-0487
18. 01-R-0293
19. 01-R-0425
20. 01-R-0457
21. 01-R-0418
22. 01-R-0483
23. 01-R-0549
24. 01-R-0500
25. 01-R-0501
26. 01-R-0502
27. 01-R-0503
28. 01-R-0504
29. 01-R-0505
30. 01-R-0506
31. 01-R-0507
32. 01-R-0508

**ITEMS ADVERSED
ON CONSENT AGENDA**

33. 01-R-0509
 34. 01-R-0510
 35. 01-R-0511
 36. 01-R-0512
 37. 01-R-0513
 38. 01-R-0514
 39. 01-R-0515
 40. 01-R-0516
 41. 01-R-0517
 42. 01-R-0518
 43. 01-R-0519
 44. 01-R-0520
 45. 01-R-0521
 46. 00-R-1361
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